

CitizenAudit.org

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No 1545-0687

2015

Open to Public Inspection for 501(c)(3) Organizations Only

For calendar year 2015 or other tax year beginning _____, and ending _____

Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue ServiceA ☐ Check box if
address changedName of organization (☐ Check box if name changed and see instructions.)D Employer identification number
(Employees' trust, see
instructions)

B Exempt under section

☒ 501(c)(3) ☐ 408(e) ☐ 220(e)

☐ 408A ☐ 530(a)

☐ 529(a)

Print
or
Type

ENSIGN PEAK ADVISORS, INC.

84-1432969

Number, street, and room or suite no. If a P.O. box, see instructions.

50 E NORTH TEMPLE ST - COB 22

E Unrelated business activity codes
(See instructions)

City or town, state or province, country, and ZIP or foreign postal code

SALT LAKE CITY, UT 84150-0022

525990 541900

C Book value of all assets
at end of year

OVER 1,000,000.

F Group exemption number (See instructions.)

G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trustH Describe the organization's primary unrelated business activity. **INVESTING**I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☒ Yes ☐ NoIf "Yes," enter the name and identifying number of the parent corporation. **SEE STATEMENT 3**J The books are in care of **CRAIG WHITING, TAX MANAGER**Telephone number **801-240-3030****Part I Unrelated Trade or Business Income**

(A) Income

(B) Expenses

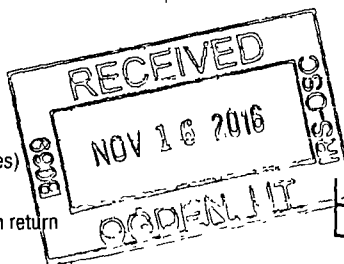
(C) Net

| | | | |
|--|--------------|---------|--------------|
| 1a Gross receipts or sales | | | |
| b Less returns and allowances | | | |
| c Balance | | | |
| 2 Cost of goods sold (Schedule A, line 7) | | | |
| 3 Gross profit. Subtract line 2 from line 1c | | | |
| 4a Capital gain net income (attach Schedule D) | | | |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | | | |
| c Capital loss deduction for trusts | | | |
| 5 Income (loss) from partnerships and S corporations (attach statement) | -22,881,866. | STMT #1 | -22,881,866. |
| 6 Rent income (Schedule C) | | | |
| 7 Unrelated debt-financed income (Schedule E) | | | |
| 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) | | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | | | |
| 10 Exploited exempt activity income (Schedule I) | | | |
| 11 Advertising income (Schedule J) | | | |
| 12 Other income (See instructions, attach schedule) | | | |
| 13 Total. Combine lines 3 through 12 | -22,881,866. | | -22,881,866. |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

(Except for contributions, deductions must be directly connected with the unrelated business income)

| | | |
|---|-----|--------------|
| 14 Compensation of officers, directors, and trustees (Schedule K) | 14 | |
| 15 Salaries and wages | 15 | |
| 16 Repairs and maintenance | 16 | |
| 17 Bad debts | 17 | |
| 18 Interest (attach schedule) | 18 | |
| 19 Taxes and licenses | 19 | |
| 20 Charitable contributions (See instructions for limitation rules) | 20 | |
| 21 Depreciation (attach Form 4562) | 21 | |
| 22 Less depreciation claimed on Schedule A and elsewhere on return | 22a | |
| 23 Depletion | 23 | |
| 24 Contributions to deferred compensation plans | 24 | |
| 25 Employee benefit programs | 25 | |
| 26 Excess exempt expenses (Schedule I) | 26 | |
| 27 Excess readership costs (Schedule J) | 27 | |
| 28 Other deductions (attach schedule) | 28 | 4,421,987. |
| 29 Total deductions. Add lines 14 through 28 | 29 | 4,421,987. |
| 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 | 30 | -27,303,853. |
| 31 Net operating loss deduction (limited to the amount on line 30) | 31 | |
| 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 | 32 | -27,303,853. |
| 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) | 33 | 1,000. |
| 34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 | 34 | -27,303,853. |



SEE STATEMENT 2

SEE STATEMENT 4

Gile

ENVELOPE
POSTMARK DATE
NOV 16 2016

SCANNED NOV 21 2016

Part III Tax Computation**35 Organizations Taxable as Corporations.** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☒ See instructions and:**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ 0. (2) \$ 0. (3) \$ 0.

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ 0.

(2) Additional 3% tax (not more than \$100,000) \$ 0.

c Income tax on the amount on line 34

35c 0.

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

37 Proxy tax. See instructions

37

38 Alternative minimum tax

38

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies

39 0.

Part IV Tax and Payments**40a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)**b** Other credits (see instructions)**c** General business credit. Attach Form 3800**d** Credit for prior year minimum tax (attach Form 8801 or 8827)**e** Total credits. Add lines 40a through 40d**41** Subtract line 40e from line 39**42** Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)**43** Total tax. Add lines 41 and 42**44a** Payments: A 2014 overpayment credited to 2015**b** 2015 estimated tax payments**c** Tax deposited with Form 8868**d** Foreign organizations: Tax paid or withheld at source (see instructions)**e** Backup withholding (see instructions)**f** Credit for small employer health insurance premiums (Attach Form 8941)**g** Other credits and payments:☐ Form 2439 ☐ Form 4136 ☐ Other

Total

45 Total payments. Add lines 44a through 44g**46** Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐**47** Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed**48** Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid**49** Enter the amount of line 48 you want: Credited to 2016 estimated tax 250,000. Refunded 0.**Part V Statements Regarding Certain Activities and Other Information** (see instructions)**1** At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here

Yes No

2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file

Yes No

3 Enter the amount of tax-exempt interest received or accrued during the tax year \$**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation N/A**1** Inventory at beginning of year**2** Purchases**3** Cost of labor**4a** Additional section 263A costs (attach schedule)**b** Other costs (attach schedule)**5** Total. Add lines 1 through 4b**6** Inventory at end of year**7** Cost of goods sold. Subtract line 6

from line 5. Enter here and in Part I, line 2

8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?

Yes No

Yes No

Yes No

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

JOAN S MCMAHON

Joan McMahon

11/11/16

P00966494

Firm's name DELOITTE TAX LLP

Firm's EIN 86-1065772

555 MISSION STREET

Firm's address SAN FRANCISCO, CA 94105

Phone no. 415-783-4000

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)**1. Description of property**

| | |
|-----|--|
| (1) | |
| (2) | |
| (3) | |
| (4) | |

2. Rent received or accrued

| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
|---|---|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| Total | 0. | Total 0. |

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)**(b) Total deductions.**

Enter here and on page 1, Part I, line 6, column (B)

0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

| 1. Description of debt-financed property | 2. Gross income from or allocable to debt-financed property | 3. Deductions directly connected with or allocable to debt-financed property |
|--|---|--|
| | | (a) Straight line depreciation (attach schedule) |
| | | (b) Other deductions (attach schedule) |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |

| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | 7. Gross income reportable (column 2 x column 6) | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) |
|---|---|---------------------------------|--|---|
| (1) | | % | | |
| (2) | | % | | |
| (3) | | % | | |
| (4) | | % | | |

Enter here and on page 1, Part I, line 7, column (A)

Enter here and on page 1, Part I, line 7, column (B)

Totals

0.

Total dividends-received deductions included in column 8

0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations | | | |
|------------------------------------|-----------------------------------|---|-------------------------------------|---|--|
| | | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross income | 6. Deductions directly connected with income in column 5 |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |

Nonexempt Controlled Organizations

| 7. Taxable income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 |
|-------------------|---|-------------------------------------|--|--|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |

Add columns 5 and 10
Enter here and on page 1, Part I, line 8, column (A)Add columns 6 and 11
Enter here and on page 1, Part I, line 8, column (B)**Totals**

0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col 3 plus col 4) |
|--------------------------|---------------------|--|---------------------------------|---|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| Totals | | 0. | | 0. |

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7 | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
|--------------------------------------|---|---|---|---|--------------------------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals | | 0. | 0. | | | 0. |

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
|-------------------------------------|-----------------------------|-----------------------------|---|-----------------------|---------------------|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | | 0. | 0. | | | 0. |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
|-----------------------------|-----------------------------|-----------------------------|---|-----------------------|---------------------|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | | 0. | 0. | | | 0. |
| Totals, Part II (lines 1-5) | | 0. | 0. | | | 0. |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percent of time devoted to business | 4. Compensation attributable to unrelated business |
|---|----------|--|--|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 | | | 0. |

Alternative Minimum Tax - Corporations

OMB No 1545-0123

▶ Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

2015

Name **ENSIGN PEAK ADVISORS, INC.** Employer identification number **84-1432969**

Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e).

| | | | |
|-----------|---|-----------|--------------|
| 1 | Taxable income or (loss) before net operating loss deduction | 1 | -27,303,853. |
| 2 | Adjustments and preferences: | | |
| a | Depreciation of post-1986 property | 2a | 787,598. |
| b | Amortization of certified pollution control facilities | 2b | |
| c | Amortization of mining exploration and development costs | 2c | |
| d | Amortization of circulation expenditures (personal holding companies only) | 2d | |
| e | Adjusted gain or loss | 2e | -336,727. |
| f | Long-term contracts | 2f | |
| g | Merchant marine capital construction funds | 2g | |
| h | Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) | 2h | |
| i | Tax shelter farm activities (personal service corporations only) | 2i | |
| j | Passive activities (closely held corporations and personal service corporations only) | 2j | |
| k | Loss limitations | 2k | |
| l | Depletion | 2l | |
| m | Tax-exempt interest income from specified private activity bonds | 2m | |
| n | Intangible drilling costs | 2n | |
| o | Other adjustments and preferences | 2o | |
| 3 | Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 2o | 3 | -26,852,982. |
| 4 | Adjusted current earnings (ACE) adjustment: | | |
| a | ACE from line 10 of the ACE worksheet in the instructions | 4a | -26,852,982. |
| b | Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount (see instructions) | 4b | 0. |
| c | Multiply line 4b by 75% (.75). Enter the result as a positive amount | 4c | |
| d | Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments (see instructions). Note: You must enter an amount on line 4d (even if line 4b is positive) | 4d | 10,797. |
| e | ACE adjustment. | | |
| | • If line 4b is zero or more, enter the amount from line 4c | | |
| | • If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount | 4e | 0. |
| 5 | Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT | 5 | -26,852,982. |
| 6 | Alternative tax net operating loss deduction (see instructions) | 6 | |
| 7 | Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions | 7 | |
| 8 | Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): | | |
| a | Subtract \$150,000 from line 7 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- | 8a | |
| b | Multiply line 8a by 25% (.25) | 8b | |
| c | Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- | 8c | |
| 9 | Subtract line 8c from line 7. If zero or less, enter -0- | 9 | |
| 10 | Multiply line 9 by 20% (.20) | 10 | |
| 11 | Alternative minimum tax foreign tax credit (AMTFTC) (see instructions) | 11 | |
| 12 | Tentative minimum tax. Subtract line 11 from line 10 | 12 | |
| 13 | Regular tax liability before applying all credits except the foreign tax credit | 13 | |
| 14 | Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return | 14 | |

STATEMENT 5

Adjusted Current Earnings (ACE) Worksheet

▶ See ACE Worksheet Instructions.

| | | | |
|-----|--|-------|--------------|
| 1 | Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626 | 1 | -26,852,982. |
| 2 | ACE depreciation adjustment: | | |
| a | AMT depreciation | 2a | |
| b | ACE depreciation: | | |
| (1) | Post-1993 property | 2b(1) | |
| (2) | Post-1989, pre-1994 property | 2b(2) | |
| (3) | Pre-1990 MACRS property | 2b(3) | |
| (4) | Pre-1990 original ACRS property | 2b(4) | |
| (5) | Property described in sections 168(f)(1) through (4) | 2b(5) | |
| (6) | Other property | 2b(6) | |
| (7) | Total ACE depreciation. Add lines 2b(1) through 2b(6) | 2b(7) | |
| c | ACE depreciation adjustment. Subtract line 2b(7) from line 2a | 2c | |
| 3 | Inclusion in ACE of items included in earnings and profits (E&P): | | |
| a | Tax-exempt interest income | 3a | |
| b | Death benefits from life insurance contracts | 3b | |
| c | All other distributions from life insurance contracts (including surrenders) | 3c | |
| d | Inside buildup of undistributed income in life insurance contracts | 3d | |
| e | Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list) | 3e | |
| f | Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e | 3f | |
| 4 | Disallowance of items not deductible from E&P: | | |
| a | Certain dividends received | 4a | |
| b | Dividends paid on certain preferred stock of public utilities that are deductible under section 247 | 4b | |
| c | Dividends paid to an ESOP that are deductible under section 404(k) | 4c | |
| d | Nonpatronage dividends that are paid and deductible under section 1382(c) | 4d | |
| e | Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a partial list) | 4e | |
| f | Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e | 4f | |
| 5 | Other adjustments based on rules for figuring E&P: | | |
| a | Intangible drilling costs | 5a | |
| b | Circulation expenditures | 5b | |
| c | Organizational expenditures | 5c | |
| d | LIFO inventory adjustments | 5d | |
| e | Installment sales | 5e | |
| f | Total other E&P adjustments. Combine lines 5a through 5e | 5f | |
| 6 | Disallowance of loss on exchange of debt pools | 6 | |
| 7 | Acquisition expenses of life insurance companies for qualified foreign contracts | 7 | |
| 8 | Depletion | 8 | |
| 9 | Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property | 9 | |
| 10 | Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of Form 4626 | 10 | -26,852,982. |

| | | |
|------------|---|-------------|
| FORM 990-T | INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS | STATEMENT 1 |
|------------|---|-------------|

| DESCRIPTION | AMOUNT |
|---|-------------------------|
| BUCKEYE PARTNERS LP | -51,595. |
| CHARLESBANK EQUITY FUND VIII LP | -139,968. |
| EIG ENERGY FUND XIV-A LP | -578,436. |
| EIG ENERGY FUND XVI LP | 401,605. |
| ENTERPRISE PRODUCTS PARTNERS LP | 2,696,647. |
| FOURPOINT HOLDINGS LLC | -33,922,042. |
| PA BLUE FUND LP | 41,042. |
| PA SURF FUND LP | 1,599. |
| PA-EP FUND LP | 15,039,454. |
| PLAINS ALL AMERICAN PIPELINE LP | -3,711,880. |
| TC PIPELINES LP | -2,658,292. |
| TOTAL TO FORM 990-T, PAGE 1, LINE 5 | <u>-22,881,866.</u> |

| | | |
|------------|------------------|-------------|
| FORM 990-T | OTHER DEDUCTIONS | STATEMENT 2 |
|------------|------------------|-------------|

| DESCRIPTION | AMOUNT |
|--|-----------------------|
| ADMINISTRATIVE EXPENSES | 22,298. |
| AMORTIZATION | 4,399,689. |
| TOTAL TO FORM 990-T, PAGE 1, LINE 28 | <u>4,421,987.</u> |

| | | |
|------------|--|-------------|
| FORM 990-T | PARENT CORPORATION'S NAME AND IDENTIFYING NUMBER | STATEMENT 3 |
|------------|--|-------------|

| CORPORATION'S NAME | IDENTIFYING NO |
|------------------------|----------------|
| CORP. OF THE PRESIDENT | 23-7300405 |

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 4

| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
|-----------------------------------|----------------|-------------------------|----------------|---------------------|
| 12/31/00 | 1,133,598. | 1,133,598. | 0. | 0. |
| 12/31/01 | 3,030,813. | 3,030,813. | 0. | 0. |
| 12/31/02 | 2,262,851. | 2,262,851. | 0. | 0. |
| 12/31/03 | 1,651,176. | 582,050. | 1,069,126. | 1,069,126. |
| 12/31/04 | 295,975. | 0. | 295,975. | 295,975. |
| 12/31/05 | 1,196,673. | 0. | 1,196,673. | 1,196,673. |
| 12/31/06 | 263,401. | 0. | 263,401. | 263,401. |
| 12/31/07 | 692,937. | 0. | 692,937. | 692,937. |
| 12/31/08 | 396,159. | 0. | 396,159. | 396,159. |
| 12/31/09 | 6,691,522. | 0. | 6,691,522. | 6,691,522. |
| 12/31/10 | 3,793,481. | 0. | 3,793,481. | 3,793,481. |
| 12/31/11 | 5,131,508. | 0. | 5,131,508. | 5,131,508. |
| 12/31/12 | 744,091. | 0. | 744,091. | 744,091. |
| 12/31/13 | 1,987,175. | 0. | 1,987,175. | 1,987,175. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 22,262,048. | 22,262,048. |

FORM 4626 ALTERNATIVE MINIMUM TAX NOL DEDUCTION STATEMENT 5

| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING |
|---------------------------------------|----------------|-------------------------|----------------|
| 12/31/09 | 6,020,514. | 6,020,514. | 0. |
| 12/31/10 | 3,272,314. | 3,212,656. | 59,658. |
| 12/31/11 | 4,097,474. | 0. | 4,097,474. |
| 12/31/13 | 2,970,955. | 0. | 2,970,955. |
| AMT NOL CARRYOVER AVAILABLE THIS YEAR | | | 7,128,087. |

AMT DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD) ADJUSTMENT STATEMENT 6

| | |
|---|-------------|
| 1) AMTI BEFORE DPAD | -26,852,982 |
| 2) QUALIFIED PRODUCTIONS ACTIVITY INCOME FROM FORM 8903 | 4,903,617 |
| 3) SMALLER OF LINE 1 OR LINE 2 BUT NOT LESS THAN 0 | 0 |
| 4) 9% OF LINE 3 | 0 |
| 5) W-2 WAGES FROM FORM 8903 | 1,266,148 |
| 6) 50% OF LINE 5 | 633,074 |
| 7) SMALLER OF LINE 4 OR LINE 6 | 0 |
| 8) DPAD FROM COOPERATIVES FROM FORM 8903 | 0 |
| 9) AMT DPAD (ADD LINES 7 AND 8) | 0 |
| 10) REGULAR DPAD | 0 |
| 11) AMT DPAD ADJUSTMENT (LINE 10 LESS LINE 9) | 0 |

| Asset No | Description | Date Acquired | Method | Life | Line No | Unadjusted Cost Or Basis | Bus % Excl | Reduction In Basis | Basis For Depreciation | Accumulated Depreciation | Current Sec 179 | Current Year Deduction |
|----------|---------------------------------|---------------|--------|------|---------|--------------------------|------------|--------------------|------------------------|--------------------------|-----------------|------------------------|
| 5 | INTANGIBLE DRILLING COSTS | 070108 | | 60M | 43 | 7,525. | | | 7,525. | 7,525. | | 0. |
| 6 | INTANGIBLE DRILLING COSTS | 070109 | | 60M | 43 | 723. | | | 723. | 723. | | 0. |
| 7 | INTANGIBLE DRILLING COSTS | 070110 | | 60M | 43 | 247. | | | 247. | 225. | | 22. |
| 8 | INTANGIBLE DRILLING COSTS | 070111 | | 60M | 43 | 1,102,570. | | | 1,102,570. | 771,799. | | 220,514. |
| 9 | INTANGIBLE DRILLING COSTS | 070112 | | 60M | 43 | 3,414,945. | | | 3,414,945. | 1,707,472. | | 682,989. |
| 10 | INTANGIBLE DRILLING COSTS | 070113 | | 60M | 43 | 1,926,786. | | | 1,926,786. | 578,036. | | 385,357. |
| 11 | INTANGIBLE DRILLING COSTS | 070114 | | 60M | 43 | 3,701,761. | | | 3,701,761. | 370,176. | | 740,352. |
| 12 | INTANGIBLE DRILLING COSTS | 070115 | | 60M | 42 | 23,704,554. | | | 23,704,554. | | | 2,370,455. |
| | * TOTAL 990-T PG 1 DEPR & AMORT | | | | | 33,859,111. | | 0. | 33,859,111. | 3,435,956. | 0. | 4,399,689. |
| | CURRENT ACTIVITY | | | | | | | | | | | |
| | BEGINNING BALANCE | | | | | 10,154,557. | | 0. | 10,154,557. | 3,435,956. | | |
| | ACQUISITIONS | | | | | 23,704,554. | | 0. | 23,704,554. | 0. | | |
| | DISPOSITIONS | | | | | 0. | | 0. | 0. | 0. | | |
| | ENDING BALANCE | | | | | 33,859,111. | | 0. | 33,859,111. | 3,435,956. | | |

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property) 990-T

OMB No 1545-0172

2015Attachment
Sequence No 179Department of the Treasury
Internal Revenue Service (99)▶ **Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.**

Name(s) shown on return

Business or activity to which this form relates

Identifying number

ENSIGN PEAK ADVISORS, INC.**FORM 990-T PAGE 1****84-1432969****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I

| | | | |
|----|---|------------------------------|------------------|
| 1 | Maximum amount (see instructions) | 1 | 500,000. |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation | 3 | 2,000,000. |
| 4 | Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions | 5 | |
| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 7 | Listed property Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction Enter the smaller of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2014 Form 4562 | 10 | |
| 11 | Business income limitation Enter the smaller of business income (not less than zero) or line 5 | 11 | |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 | 12 | |
| 13 | Carryover of disallowed deduction to 2016 Add lines 9 and 10, less line 12 | 13 | |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

| | | | |
|----|--|----|--|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | |

Part III MACRS Depreciation (Do not include listed property) (See instructions.)**Section A**

| | | | |
|----|--|----|--|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2015 | 17 | |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> | | |

Section B - Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property | | | | | | |
| b 5-year property | | | | | | |
| c 7-year property | | | | | | |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs | | S/L | |
| h Residential rental property | / | | 27.5 yrs | MM | S/L | |
| | / | | 27.5 yrs | MM | S/L | |
| i Nonresidential real property | / | | 39 yrs | MM | S/L | |
| | / | | | MM | S/L | |

Section C - Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|----------------|---|--|--------|----|-----|--|
| 20a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs | | S/L | |
| c 40-year | / | | 40 yrs | MM | S/L | |

Part IV Summary (See instructions.)

| | | | |
|----|---|----|----|
| 21 | Listed property Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr | 22 | 0. |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)

| | | | | | | | | | | | |
|--|-------------------------------------|--|-------------------------------|--|---------------------------|--|----------------------------------|---------------------------------------|--|--|--|
| 24a Do you have evidence to support the business/investment use claimed? | | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | | 24b If "Yes," is the evidence written? | | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost or other basis | (e) Basis for depreciation (business/investment use only) | (f) Recovery period | (g) Method/ Convention | (h) Depreciation deduction | (i) Elected section 179 cost | | | |
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use | | | | | | | | 25 | | | |
| 26 Property used more than 50% in a qualified business use | | | | | | | | | | | |
| | | % | | | | | | | | | |
| | | % | | | | | | | | | |
| | | % | | | | | | | | | |
| 27 Property used 50% or less in a qualified business use | | | | | | | | | | | |
| | | % | | | | S/L - | | | | | |
| | | % | | | | S/L - | | | | | |
| | | % | | | | S/L - | | | | | |
| 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 | | | | | | | | 28 | | | |
| 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 | | | | | | | | 29 | | | |

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

| | | | | | | |
|--|--|--|--|--|--|--|
| | (a) Vehicle | (b) Vehicle | (c) Vehicle | (d) Vehicle | (e) Vehicle | (f) Vehicle |
| 30 Total business/investment miles driven during the year (do not include commuting miles) | | | | | | |
| 31 Total commuting miles driven during the year | | | | | | |
| 32 Total other personal (noncommuting) miles driven | | | | | | |
| 33 Total miles driven during the year Add lines 30 through 32 | | | | | | |
| 34 Was the vehicle available for personal use during off-duty hours? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 35 Was the vehicle used primarily by a more than 5% owner or related person? | | | | | | |
| 36 Is another vehicle available for personal use? | | | | | | |

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

| | |
|--|--|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners. | |
| 39 Do you treat all use of vehicles by employees as personal use? | |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? | |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? | |

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.**Part VI Amortization**

| | | | | | | |
|--|------------------------------------|------------------------------|------------------------|---|--------------------------------------|------------|
| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year | |
| 42 Amortization of costs that begins during your 2015 tax year | | | | | | |
| INTANGIBLE DRILLING COSTS | 070115 | 23,704,554. | | 60M | 2,370,455. | |
| 43 Amortization of costs that began before your 2015 tax year | | | | | | |
| | | | | 43 | 2,029,234. | |
| 44 Total. Add amounts in column (f). See the instructions for where to report. | | | | | 44 | 4,399,689. |

Form **8827**Department of the Treasury
Internal Revenue Service**Credit for Prior Year Minimum Tax - Corporations**

OMB No. 1545-0123

2015

▶ Attach to the corporation's tax return.

▶ Information about Form 8827 and its instructions is at www.irs.gov/form8827.

| | | |
|---|--|---|
| Name ENSIGN PEAK ADVISORS, INC. | | Employer identification number 84-1432969 |
| 1 | Alternative minimum tax (AMT) for 2014. Enter the amount from line 14 of the 2014 Form 4626 | 139,445. |
| 2 | Minimum tax credit carryforward from 2014. Enter the amount from line 9 of the 2014 Form 8827 | 610,856. |
| 3 | Enter any 2014 unallowed qualified electric vehicle credit (see instructions) | |
| 4 | Add lines 1, 2, and 3 | 750,301. |
| 5 | Enter the corporation's 2015 regular income tax liability minus allowable tax credits (see instructions) | 0. |
| 6 | Is the corporation a "small corporation" exempt from the AMT for 2015 (see instructions)? • Yes. Enter 25% of the excess of line 5 over \$25,000. If line 5 is \$25,000 or less, enter -0- • No. Complete Form 4626 for 2015 and enter the tentative minimum tax from line 12 | 0. |
| 7a | Subtract line 6 from line 5. If zero or less, enter -0- | 0. |
| 7b | b For a corporation electing to accelerate the minimum tax credit, enter the bonus depreciation amount attributable to the minimum tax credit (see instructions) | |
| 7c | c Add lines 7a and 7b | |
| 8a | 8a Enter the smaller of line 4 or line 7c. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions | |
| 8b | b Current year minimum tax credit. Enter the smaller of line 4 or line 7a here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c | 0. |
| 8c | c Subtract line 8b from line 8a. This is the refundable amount for a corporation electing to accelerate the minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 19c (or the applicable line of your return) | |
| 9 | 9 Minimum tax credit carryforward to 2016. Subtract line 8a from line 4. Keep a record of this amount to carry forward and use in future years | 750,301. |

ENSIGN PEAK ADVISORS, INC.
Form 990-T

EIN: 84-1432969
FYE: 12/31/2015

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Taxpayer on behalf of itself is making the de minimis safe harbor election under Treas. Reg. § 1.263(a)-1(f) for all eligible amounts paid or incurred during the taxable year.

ENSIGN PEAK ADVISORS, INC.
Form 990-T

EIN: 84-1432969
FYE: 12/31/2015

Section 1.263(a)-3(n) Capitalization Election

Taxpayer hereby elects on behalf of itself to capitalize repair and maintenance costs under Treas. Reg. § 1.263(a)-3(n). The costs were incurred during the taxable year in the electing taxpayer's trade or business and the electing taxpayer treats such costs as capital expenditures on its books and records.